

COPY OF PAPERS' ORIGINALLY FILED

	Please type a plus sign (+) insi	this box	\rightarrow
--	----------------------------------	----------	---------------

PTO/SB/01 (12-97)
Approved for use through \$/30/00. OMB 0651-0032
Petent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration
Submitted Of
with Initial
Filing

OR X Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Nu	mber			
First Named invento	ď	М	ichaeï	
COMPL	ETE IF	KNOV	WN	
Application Number		10/	046 606	
Filing Date			/2002	
Group Art Unit		•		
Examiner Name	K	arla	Quintous	_

My residence, post office address, and officenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is fisted below) or an original, first and joint inventor (if plus names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:	ď
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:	ıi
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:	
Liquid Control Cup	
the specification of which (Title of the Invention)	
is attached horsto Liquid Control Cup	
was filed on (MM/ODYYYY) 1/16/2002 as United States Application Number or PC1 internal	onel
	-
Application Number 10/046,606 and was amended on (AM/DDYYYY) (4 applic	ible).
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.	
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.	
The state of the s	
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inven	N'e
conficale, or 355(2) of any PCT international application which designated at least one country other than the United State	ol
America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certific or of any PCT international application having a filing date before that of the application on which priority is claimed.	HE,
Prior Foreign Application Foreign Filing Date Priority . Certified Copy Attache Number(s) Country (MWDD/YYY) Not Claimed YES NO	13
Number(s) Country (MM/DD/YYYY) Not claimed YES NO	-
	l
	\neg
Additional foreign application numbers are fisted on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby ctarm the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.	
Application Number(s) Filing Date (MWDD/YYY)	
	_
10,046,606 1/16/2002 Additional provisional application and ap	^
10,046,606 1/16/2002 numbers are listed on a supplemental priority data shee	. 1
PTO/SB/02B attached hereto.	1

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the analytical case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Weshington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

+

Please type a plus sign (+) inside this box 🍑 🔣 Under the Paperwork Reduction Act of 1995, no person	PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE as are required to respond to a collection of information unless it contains
Under the Paperwork Reduction Act of 1995, no person	us sus tednices to testions to a corection of information fittiess & coulsius
a until PAID another member	

		nder the Paperwork Redu valid OMB control numbe		o person	s are required	to respond t	o a poliection o	d information un	less it contains
OIPE	DECL	ARATION-	— Utility	or or	Desig	n Pat	ent A	plicat	ion
APR 0 3 2002	I have been the beauty and a 25 LLC P. 490 of any Halled States and English (A) or 255/A of any DCT international analysis to the								
RADEMARK	U.S. P	U.S. Parent Application or PCT Parent Number			Parent Filing Date Parent (MM/DD/YYYY)			arent Patent Number (If applicable)	
COPY OF PAPERS ORIGINALLY FILED	. 10/	'046,606 -			01/	16/200		•	
	Additional U.S.	or PCT international applic	calion numbers are	isted on	a supplement	al priority dat	a sheet PTO/S	B/02B steched	hereta.
	As a named inventor, and Trademark Office	f hereby appoint the folion connected therewith:	wing registered pra Customer Nimble OR Registered practi					Piece Cus Number Ba Label h	torser or Code
	N.	ıme	Registra Numb	tion	HEMION GOISTIS	Na		Registration Number	
			, and the second			· · · · · · · · · · · · · · · · · · ·		-	
	Additional segister	red practitioneris) named	na supplemental P		Barring at 1		and Dimited to	C official box	
	Direct all correspondence to: Customer Number or Bar Code Label								
	Name M	ichael E. Wr							
	Address 7155 Wadsworth Way								
	Address								
	City I	ndianapolis.			State	-T Ni	ZIP 4	6219	
	Country U	SA ·	Telephone	.31	7_356_5		Fax 3	17-353-	2268_
j	I hereby declare that all statements made heren of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the topowledge that willful false statements and the like so made are punishable by fine or impresonment, or both, under 16 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent assued thereon.								
	Name of Sole or First Inventor			C n patium, has been filed for this unsigned inventor					
	Given Name (first and middle fif anyl)			Family Name or Surname					
-		Michael Edward			Writt				
.	Signature	El huf C	Win	17			···	Date	3/8/02
	Residence: City	Indianapol	is State	IN	Country	USA		Citizenship	yes
}	Post Office Address 7155 Wadsworth Way .								
	Post Office Address				·	· ····································	T		
	City	Indplis State	In	ZIP	462	19	Country	usa	ł

supplemental Additional Inventoris) sheet(s) PTO/SB/02A attached hereto

Additional Inventors are being named on the